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## APPLICANTS

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\*\* CONTINUING DATA \*\*\*\*\* *N TeS*\*\* FOREIGN APPLICATIONS \*\*\*\*\* *W EG*IF REQUIRED, FOREIGN FILING LICENSE GRANTED  
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\*\* SMALL ENTITY \*\*

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY SC	SHEETS DRAWING 4	TOTAL CLAIMS 37	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature <i>[Signature]</i> Initials				

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## TITLE

Shackle pocket buoy

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